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THOMAS P O'CONNELL 1026A MASSACHUSETTS AVENUE ARLINGTON, MA 02476				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	8	ATTOR!	NEY DOCKET NO.	CONFIRMATION NO.
16/814,308 03/31/2004			Brian Poitras		POB-501US		5186
TITLE OF INVENTION: A	UTOMATED COMP	OSTING SYSTEM					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUB	PREV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUS
nonprovisional	YES	\$755	\$0	\$0		\$755	03/09/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
SELF, SHEL		3725	241-101200				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).				winting on the patent front page, list names of up to 3 registered patent attorneys			
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Tree Address' indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(2) the name of a single firm (having as a member a registered storney or sgent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be proteed.				
3 ASSIGNEE NAME AND	RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or ty	pe)			
PLEASE NOTE: Unicss	an assignce is identi	fied below, no assignee	data will appear on the p	natent. If an assignor	s is ider	stified helow, the do-	cument has been filed for
(A) NAME OF ASSIGN		ionos er que form es re-s	(B) RESIDENCE: (CITY	and STATE OR CO	OUNTR	Y)	
Ploase check the appropriate	assignee category or	categories (will not be pr	inted on the patent):	Individual Con	poration	or other private grou	p entity Government
4a. The following fee(s) are	submitted:	41	b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)				
Issue Fee Publication Fee (Nos	mall agritu dicanust n	annitted)	A check is enclosed. Payment by credit eard. Form PTO-2038 is attached.				
Advance Order - # of		The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Depost Account Number(enclose an extra copy of this form).					
5. Change in Entity Status	MALE FATETY status	See 37 CFR 1.27.	D b. Applicant is no lon	ger claiming SMALI	, ENTI	Y status. Scc 37 CFI	t 1.27(g)(2).
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if requ ords of the United Stat	ired) will not be accepted as Patent and Trademark	I from anyone other than t Office.	he applicant, a regist	ered atte	amey or agent; or the	assignce or other party in
Authorized Signature				Date03/0	4/200	9	***************************************
Typed or printed name	homas P. O'Co	enrell		Registration No	37	1997	
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